PTO/SB/21(08/00)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/141,210 August 27, 1998		İ		
		Filing Date			REC	EIVED	
		First Named Inventor	Phil	Phillip E. Mattison JAN		0 8 2002	
		Group Art Unit	2621 Technolog		Technolog	V Center 2600	
			Examiner Name	Y. I	Cassa		2000
Total Number of F	Pages in This Submission	17	Attorney Docket Number	423	90P4817		
		ENCLOS	SURES (check all tha	t app	ly)		
Fee Transmittal Form		Assignment Papers (for an Application)			After Allowance Co to Group	mmunication	
X Fee At	ttached	Drawing	(s)		Appeal Communication of Appeals and Interest	ation to Board erferences	
Amendment / Response		Licensing-related Papers			Appeal Communica (Appeal Notice, Brief,	ation to Group Reply Brief)	
After Final Affidavits/declaration(s)		Petition			Proprietary Informa	ation	<u> </u>
Extension of Time Request		Petition to Convert a Provisional Application			Status Letter	ć	1
Express Abandonment Request		Power of Attorney, Revocation Change of Correspondence Address  Other Enclosure(s) (please identify below):					1
Information	Disclosure Statement	Terminal	I Disclaimer .			tcard	
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		First Named Inventor Phillip E. Mattison JAN Group Art Unit 2621 Technology (Assignment Papers (For an Application) Appeal Communication to Board of Appeal Communication to Board of Appeal Communication to Group (Appeal Notice, Brief, Rephy Brief) Petition Application Provisional Application Provisional Application Provisional Application Provisional Application Group (Appeal Notice, Brief, Rephy Brief) (Please identify below):    Remarks   Papers   Provisional Application   Provis					
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Firm or							İ
Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN							
Signature	Polnuf	1/2	2				
Date	November 9, 20	<del>)</del> 01			_		
	CERTIFIC	CATE OF MA	ILING (OR TRANSMISS	ION)			
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/17 (10-01)
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FEE TRANSM	Application Number 09/141,210 Filing Date 08/27/98 First Named Inventor Phillip E. Mattison Examiner Name Y. Kassa Group Art Unit 2621	09/141,210				
		Filing Date	****			
for FY 20	02	First Named Inventor				
Petent fees are subject to annu	_	Examiner Name	Y. Kassa			
<del></del>	Γ-	Group Art Unit	2621			
TOTAL AMOUNT OF PAYMENT	(\$) 110.00	Attorney Docket Number	42390P4817			

The Commissioner is hereby authorized to charge 3. ADDITIONAL FEE								
1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:  Large Entity Small Entity								
Account 02-2666   Code (\$) Code (\$)	ee Paid							
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Deposit Account Name  Blakely, Sokoloff, Taylor & Zafman LLP  127 50 227 25 Surcharge - late provisional filing fee or cover sheet.								
Charge Any Additional Fee Required 139 130 Non-English specification Under 37CFR 1.16 and 1.17								
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See 37 CFR 1.27 112 920 112 920 Requesting publication of SIR phorito								
2. A Payment Enclosed:    113 1,840 13 1,840 Requesting publication of SIR after								
115 110 215 55 Extension for response within first month	110							
FEE CALCULATION 116 390 216 195 Extension for response within second month								
1. FILING FEE 117 890 217 445 Extension for response within third month								
Large Entity Small Entity 118 1,390 218 695 Extension for response within fourth month								
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101 710 201 255 Littliby filing foo 120 310 220 155 Filing a brief in support of an appeal	=							
106 320 206 160 Design filling fee 121 270 221 135 Request for oral hearing	,							
107 490 207 245 Plant filling fee 138 1,510 138 1,510 Petition to institute a public use proceeding	1							
107 450 207 245 Frank liming fee 140 110 240 55 Petition to revive - unavoidably	1							
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102 80 202 40 Independent claims in excess of 3 179 710 279 355 Request for Continued Examination (RCE)								
104 270 204 135 Multiple Dependent claim 169 900 169 900 Request for expedited examination								
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